Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	art 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
£ 7	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Shawnice First name A Middle name	First name Middle name			
	Bring your picture identification to your meeting with the trustee.	McCane-Blakeley Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years	Shawnice Blakeley				
	Include your married or maiden names.	,				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8661				

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
Where you live	1031 West 17th Street	If Debtor 2 lives at a different address:		
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Lorain			
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name or EINs. Business name or Elns.		

Part 3	<u></u>					
	Report About Any Ru	einaeeae	ou Own as a Sole Proprietor			
		311163363	Tou Own as a Jole I Tophletor			
(Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of busines	ss		
t 3 3	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
8	If you have more than one sole proprietorship, use a		Number, Street, City, State &	ZIP Code		
	separate sheet and attach it to this petition.		Check the appropriate box to	describe your husiness:		
•				s (as defined in 11 U.S.C. § 101(27A))		
			_	ate (as defined in 11 U.S.C. § 101(51B))		
			_ •	ed in 11 U.S.C. § 101(53A))		
				s defined in 11 U.S.C. § 101(6))		
			☐ None of the above			
(E	Are you filing under Chapter 11 of the Bankruptcy Code and are you a s <i>mall busin</i> ess debtor?	deadlines operation in 11 U.S	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proc in 11 U.S.C. 1116(1)(B).			
	For a definition of small business debtor, see 11	■ No.	I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
ι	U.S.C. § 101(51D).	☐ No.	Code.	but I am NOT a small business debtor according to the definition in the bankrupicy		
		☐ Yes.	I am filing under Chapter 11 a	and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part 4	4: Report if You Own or	Have Any	Hazardous Property or Any Pr	operty That Needs Immediate Attention		
	Do you own or have any	■ No.				
i	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
public health or safety? Or do you own any property that needs immediate attention?			If immediate attention is needed, why is it needed?			
ļ I	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is the property?			
ι	urgent repairs?		Nu	mber, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Debtor 1 Shawnice A McCane-Blakeley Case number (if known)			f known)				
Part	6: Answer These Questi	ons for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consume individual primarily for a personal,		d in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
Yes. Go to line 17.							
		16b.	Are your debts primarily business money for a business or investmen				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe the	at are not consumer debts or business of	debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.		u estimate that after any exempt propert e to distribute to unsecured creditors?	y is excluded and administrative expenses		
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Part	7: Sign Below	,					
For	you	I have ex	amined this petition, and I declare u	nder penalty of perjury that the informa	tion provided is true and correct.		
				aware that I may proceed, if eligible, ur vailable under each chapter, and I choo			
		If no attor	attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ment, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request	relief in accordance with the chapte	r of title 11, United States Code, specifi	ed in this petition.		
		bankrupto and 3571					
		Shawni	nice A McCane-Blakeley e A McCane-Blakeley of Debtor 1 Signature of Debtor 2				
		Executed	Executed on MM / DD / YYYY Executed on MM / DD / YYYY				

Official Form 101

Debtor 1	Shawnice A McCane-Blakeley	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Keith L. Borders	Date	June 25, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Keith L. Borders		
Printed name		
Borders & Gerace LLC		
Firm name		
3401 Enterprise Parkway		
Suite 340		
Beachwood, OH 44122		
Number, Street, City, State & ZIP Code		
Contact phone 216-766-5704	Email address	kblaw123@gmail.com
0073020 OH		
Bar number & State		

Filli	this information to identify your case:		
Debt			
Debt	First Name Middle Name Last Name		
	e if, filing) First Name Middle Name Last Name		
Unite	d States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO		
	number		
(if kno	vn)	_	k if this is an ded filing
		a	404g
Off	cial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
infor	complete and accurate as possible. If two married people are filing together, both are equally responsible for nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendoriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,255.52
	1c. Copy line 63, Total of all property on Schedule A/B	\$	16,255.52
Part	Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	15,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	73,941.25
	Your total liabilities	\$	88,941.25
Part	Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,346.42
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,564.00
Part	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

the court with your other schedules.

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,676.91

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,176.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,176.00

Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Shawnice A McC	Cane-Blakeley Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	OHIO		
Case number _					☐ Check if this is an
					amended filing
000 1 1 5	4004/5				
	orm 106A/B				
Schedul	le A/B: Prop	perty			12/15
think it fits best. E	Be as complete and accur re space is needed, attach	ate as possible. If two married	ce. If an asset fits in more than o people are filing together, both a On the top of any additional pag	re equally responsible for s	upplying correct
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate Y	ou Own or Have an Interest In		
1. Do you own or	have any legal or equitab	le interest in any residence, bu	ilding, land, or similar property?		
■ No. Go to Pa	irt 2				
Yes. Where					
Part 2: Describe	Your Vehicles				
someone else dri	ives. If you lease a vehic		cles, whether they are register G: Executory Contracts and U		ornoid you own that
□ No					
■ Yes					
				Do not doduct occured a	laima ar avamatiana Dut
-	GMC Terrain		t in the property? Check one	the amount of any secur	laims or exemptions. Put ed claims on Schedule D:
	2010	Debtor 1 only Debtor 2 only		Current value of the	ims Secured by Property. Current value of the
Approxima	te mileage:	Debtor 1 and Deb	otor 2 only	entire property?	portion you own?
Other infor	mation: S Possession	At least one of the	e debtors and another		
Deptor's	Possession	Check if this is of (see instructions)	community property	\$12,000.00	\$12,000.00
			l vehicles, other vehicles, and els, snowmobiles, motorcycle a		
.pages you h	ave attached for Part 2	. Write that number here	ries from Part 2, including an		\$12,000.00
	Your Personal and Hous have any legal or equi	sehold Items table interest in any of the f	following items?		Current value of the
					portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture	e, linens, china, kitchenware			
Official Form 106	A/B	Schedule	e A/B: Property		page 1

19-13937-aih Doc 1 FILED 06/25/19 ENTERED 06/25/19 13:46:41 Page 10 of 53

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Debte	or 1	Shawnice A	McCane-Blakeley	Case number	(if known)
	Yes.	Describe			
			Household Goods and Furnishings, D	ebtor(s) Possession	\$2,000.00
<i>E</i>	No	es: Televisions a	and radios; audio, video, stereo, and digital equip I phones, cameras, media players, games	ment; computers, printers, scanners	; music collections; electronic devices
			Misc. Electronics, Debtor(s) Possession	on	\$400.00
E) ■	xample No		I figurines; paintings, prints, or other artwork; boo ons, memorabilia, collectibles	ks, pictures, or other art objects; sta	mp, coin, or baseball card collections;
E) ■	xample No	musical instr	ographic, exercise, and other hobby equipment; b	picycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
		Describe			
E	No		s, shotguns, ammunition, and related equipment		
	No .		othes, furs, leather coats, designer wear, shoes,	accessories	
			Wearing Apparel, Debtor(s) Possession	n	\$500.00
	No		welry, costume jewelry, engagement rings, wedd	ling rings, heirloom jewelry, watches	, gems, gold, silver
			Misc. Jewelry, Debtor(s) Possession		\$100.00
E	E <i>xamp</i> No	rm animals bles: Dogs, cats, Describe	birds, horses		
	No	ner personal an	d household items you did not already list, in	cluding any health aids you did n	ot list
	165.	Oive specific IIII	omaton		
			of all of your entries from Part 3, including ar number here		\$3,000.00
Part 4	1: Des	scribe Your Finan	icial Assets		

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Debtor 1	Shawnice A McCane-Blakeley	Case numbe	:r (if known)
			claims or exemptions.
l6. Cash <i>Exam</i> □ No	ples: Money you have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file	your petition
		Cash o Hand, Debtor(Posses	(s)
	sits of money ples: Checking, savings, or other financial accounts institutions. If you have multiple accounts in	nts; certificates of deposit; shares in credit unions, l	brokerage houses, and other similar
		Institution name:	
	17.1.	Debit Account, Chime	\$110.00
18. Bonds	s, mutual funds, or publicly traded stocks		
	ples: Bond funds, investment accounts with broken	erage firms, money market accounts	
■ No □ Yes.	Institution or issuer n	ame:	
19. Non-p		ated and unincorporated businesses, including	an interest in an LLC, partnership, and
■ No			
☐ Yes.	Give specific information about them Name of entity:	 % of owner	ship:
Negot Non-ri ■ No	nment and corporate bonds and other negot tiable instruments include personal checks, cash negotiable instruments are those you cannot tran Give specific information about them	iers' checks, promissory notes, and money orders.	
	Issuer name:		
	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(k), 40	3(b), thrift savings accounts, or other pension or pro	ofit-sharing plans
	List each account separately. Type of account:	Institution name:	
Your s Exam		hat you may continue service or use from a compar ublic utilities (electric, gas, water), telecommunication	
□ No ■ Yes.		Institution name or individual:	
		Security Deposit, Debtor's Landlord	\$550.00
	ties (A contract for a periodic payment of money	to you, either for life or for a number of years)	
■ No □ Yes.			
26 U.S.	ats in an education IRA, in an account in a qu .C. §§ 530(b)(1), 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state	tuition program.
■ No □ Yes.	Institution name and description.	Separately file the records of any interests.11 U.S.0	C. § 521(c):

Official Form 106A/B Schedule A/B: Property page 3

De	ptor 1	Snawnice A McCane-Blake	iey		case number (if known)	
	■ No	, equitable or future interests in		ted in line 1), and	I rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about the	em			
		s, copyrights, trademarks, trade ples: Internet domain names, webs			nts	
		Give specific information about th	em			
	Examµ ■ No	ses, franchises, and other general ples: Building permits, exclusive lice. Give specific information about the	enses, cooperative association hol	dings, liquor licens	ses, professional licenses	
						Current value of the
MC	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax ref □ No	funds owed to you				
	Yes.	Give specific information about the	em, including whether you already f	filed the returns an	d the tax years	
					7	
			2019 Tax refunds			Unknown
	Examp ■ No □ Yes.	support oles: Past due or lump sum alimony Give specific information	/, spousal support, child support, m	naintenance, divor	ce settlement, property sett	tlement
	Examp ■ No	ples: Unpaid wages, disability insur benefits; unpaid loans you ma		sick pay, vacation	n pay, workers' compensat	ion, Social Security
	☐ Yes.	Give specific information				
		sts in insurance policies ples: Health, disability, or life insura	nce; health savings account (HSA); credit, homeown	ner's, or renter's insurance	
	Yes.	Name the insurance company of e Company na		Beneficiar	n	Surrender or refund
		Company ne	arre.	Denenda	y.	value:
		Term Life Employer No cash v	Insurance, Debtor's alue			\$0.00
32.	If you a	terest in property that is due you are the beneficiary of a living trust, one has died.		nce policy, or are o	currently entitled to receive	property because
	■ No					
	⊔ Yes.	Give specific information				
	Examp	s against third parties, whether o ples: Accidents, employment dispu			for payment	
	■ No □ Yes.	Describe each claim				

Official Form 106A/B Schedule A/B: Property page 4

Del	otor 1 Shawnice A McCane-Bla	akeley		Case number (if known)	
_	Other contingent and unliquidated	claims of every nature, inc	luding counterclaims	of the debtor and rights to	set off claims
I	Yes. Describe each claim				
		Funds garnished with Financial Franco Barile, Esq. 11351 Pearl Road Suite 300 Strongsville, Ohio 441	·	uptcy filing by DBS	\$595.52
_	Any financial assets you did not alr ■ No	eady list			
_	☐ Yes. Give specific information				
36.	Add the dollar value of all of your for Part 4. Write that number here.	•		, -	\$1,255.52
Par	t 5: Describe Any Business-Related Pro	perty You Own or Have an Int	erest In. List any real esta	ate in Part 1.	
•	Do you own or have any legal or equitable No. Go to Part 6. Yes. Go to line 38.	e interest in any business-rela	nted property?		
	Describe Any Farm- and Commercial If you own or have an interest in farmle	and, list it in Part 1.			
	■ No. Go to Part 7. □ Yes. Go to line 47.				
Par	Describe All Property You Own	or Have an Interest in That Y	ou Did Not List Above		
	Do you have other property of any be Examples: Season tickets, country clu ■ No		t?		
[☐ Yes. Give specific information				
54.	Add the dollar value of all of your	entries from Part 7. Write t	hat number here		\$0.00
Par	List the Totals of Each Part of th	is Form			
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$12,000.00		
57.	Part 3: Total personal and househ	old items, line 15	\$3,000.00		
58.	,		\$1,255.52		
59.	•	• .	\$0.00		
60.	· ·		\$0.00		
61.	Part 7: Total other property not lis	ted, line 54	+\$0.00		
62.	Total personal property. Add lines	56 through 61	\$16,255.52	Copy personal property to	stal \$16,255.52
63.	Total of all property on Schedule	VB . Add line 55 + line 62			\$16,255.52

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:						
Debtor 1	Shawnice A McC	ane-Blakeley				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Case number				☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	Household Goods and Furnishings, Debtor(s) Possession	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)				
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)				
	Misc. Electronics, Debtor(s) Possession	\$400.00		\$400.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(1)(0)				
	Wearing Apparel, Debtor(s)	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)				
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)				
	Misc. Jewelry, Debtor(s) Possession Line from Schedule A/B: 12.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)				
	Line Ironi Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(0)				
	Debit Account, Chime Line from Schedule A/B: 17.1	\$110.00		\$110.00	Ohio Rev. Code Ann. § 2329.66(A)(3)				
	Line from Schedule A/B. 11.1			100% of fair market value, up to	2020.00(17)(0)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

any applicable statutory limit

Debtor	1 Shawnice A McCane-Blakeley	Case number (if known)					
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption.				
	inds garnished within 90 days of inkruptcy filing by DBS Financial	\$595.52	\$595.52	Ohio Rev. Code Ann. § 2329.66(A)(18)			
Fr 11 St St	anco Barile, Esq. 351 Pearl Road uite 300 rongsville, Ohio 44136 ne from Schedule A/B: 34.1		100% of fair market value, up to any applicable statutory limit	` '` '			
	e you claiming a homestead exemption ubject to adjustment on 4/01/22 and every No			nt.)			
	Yes. Did you acquire the property cover ☐ No ☐ Yes	ed by the exemption wi	thin 1,215 days before you filed this case	?			

Official Form 106C

Schedule C: The Property You Claim as Exempt

Fill in this informat	ion to identify you	ur case:				
	Shawnice A Mc		st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name La	st Name			
United States Bankr						
Case number						
(if known)					_	if this is an led filing
Official Form 1	106D				<u></u>	· ·
		Who Have Claims Se	cured	by Propert	у	12/15
		If two married people are filing together, bout, number the entries, and attach it to the				
1. Do any creditors hav	ve claims secured b	y your property?				
☐ No. Check thi	s box and submit t	his form to the court with your other sch	edules. You	ı have nothing else t	o report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
2. List all secured clai for each claim. If more	than one creditor has	more than one secured claim, list the creditors a particular claim, list the other creditors in Fical order according to the creditor's name.		Column A Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1 CNAC		Describe the property that secures the c	claim:	value of collateral. \$15,000.00	claim \$12,000.00	If any \$3,000.00
Creditor's Name		2010 GMC Terrain Debtor's Possession		· , ,		
12802 Hamil Crossings B Carmel, IN 4	lvd.	As of the date you file, the claim is: Chec apply.	k all that			
Number, Street, City		☐ Contingent☐ Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as morte	gage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
☐ At least one of the c	lebtors and another	☐ Judgment lien from a lawsuit	,			
Check if this claim community debt			rchase Mo	oney Security		
Date debt was incurre	4/2019	Last 4 digits of account number	xxxx			
If this is the last pag Write that number h	ge of your form, add ere:	Column A on this page. Write that number I the dollar value totals from all pages.	here:	\$15,00 \$15,00		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in th	nis information to identify your	case:				
Debtor 1	Shawnice A McCa	ane-Blakeley				
	First Name	Middle Name	Last Name	_		
Debtor 2 (Spouse if,		Middle Name	Last Name			
	-	NORTHERN DISTRICT				
United	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Case nu	ımber					
(if known)					_	heck if this is an
					ar	nended filing
Officia	al Form 106E/F					
	dule E/F: Creditors W	ho Have Unsecu	red Claims			12/15
Schedule Schedule left. Attac name and	Itory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec h the Continuation Page to this pag I case number (if known).	ired Leases (Official Form 10 ured by Property. If more sp e. If you have no information	06G). Do not include ace is needed, copy	any creditors with partially se the Part you need, fill it out, no	cured claims tumber the enti	that are listed in ries in the boxes on the
Part 1:	List All of Your PRIORITY Un					
_	ny creditors have priority unsecure	d claims against you?				
	o. Go to Part 2.					
ΠY						
Part 2:						
_	ny creditors have nonpriority unsec					
ЦN	o. You have nothing to report in this p	art. Submit this form to the cou	ırt with your other sche	edules.		
Y	es.					
unse	all of your nonpriority unsecured cla cured claim, list the creditor separately one creditor holds a particular claim, li 2.	for each claim. For each clair	n listed, identify what t	ype of claim it is. Do not list clair	ms already incl	uded in Part 1. If more
						Total claim
				All		
	City of East Cleveland	Last 4 digits	of account number	Accounts		\$105.00
	Nonpriority Creditor's Name Automated Traffic Control	When was th	e debt incurred?	5.2019		
	P.O. Box 22091 Tempe, AZ 85285-2091					
	Number Street City State Zip Code	As of the dat	e you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingen	t			
	Debtor 2 only	☐ Unliquidat	ed			
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	other Type of NON	PRIORITY unsecured	d claim:		
	☐ Check if this claim is for a comr			ration agreement or divorce tha	t vou did not	
	Is the claim subject to offset?	report as prio		agroomont or divorce tha	. , 50 010 1101	
	■ No	☐ Debts to p	ension or profit-sharin	g plans, and other similar debts		
	□Yes	Othor Sp	acify Violation			

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Debt	or 1 Shawnice A McCane-Blakeley			
4.2	City of East Cleveland	Last 4 digits of account number	All Accounts	\$105.00
	Nonpriority Creditor's Name Automated Traffic Control P.O. Box 22091 Tempe, AZ 85285-2091	When was the debt incurred?	12.2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Violation	g plans, and other similal debts	
4.3	Convergent Outsourcing	Last 4 digits of account number	All Accounts	\$492.49
	Nonpriority Creditor's Name 800 SW 39th St.	When was the debt incurred?	1.2019	
	Renton, WA 98057 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Collections		
4.4	Credit Acceptance	Last 4 digits of account number	All Accounts	\$5,039.00
···	Nonpriority Creditor's Name P.O. Box 5070	When was the debt incurred?	2015	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Southfield, MI 48086-5070 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	·		
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Automobile	Deficiency	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 8

Debtor	1 Shawnice A McCane-Blakeley		Case number (if known)	
4.5	Credit Collection Service	Last 4 digits of account number	All Accounts	\$71.65
	Nonpriority Creditor's Name P.O. Box 447	When was the debt incurred?	6.2019	
	Norwood, MA 02062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collections		
4.6	DBS Financial Nonpriority Creditor's Name	Last 4 digits of account number	5658	\$15,328.24
	711 Johnston St. Suite 1B	When was the debt incurred?	2018	
	Akron, OH 44306 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Civil Judgn	nent	
			All	
4.7	Enhanced Recovery	Last 4 digits of account number	Accounts	\$162.00
	Nonpriority Creditor's Name P.O. Box 57547	When was the debt incurred?	11.2018	
	Jacksonville, FL 32241 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collections		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 8

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

1 Shawnice A McCane-Blakeley	Case number (if known)				
First Federal Credit Control, Inc.	Last 4 digits of account number	All Accounts	\$640.00		
Nonpriority Creditor's Name 24700 Chagrin Blvd. Suite 205	When was the debt incurred?	1.2014			
Beachwood, OH 44122-5662	_				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes	Other. Specify All Account	ts			
		All			
IC System, Inc.	Last 4 digits of account number	Accounts	\$1,784.60		
Nonpriority Creditor's Name 444 Highway 96 East P.O. Box 64437	When was the debt incurred?	2019			
Saint Paul, MN 55164-0437		e. Charle all that apply			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан mat аррну			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
\square Check if this claim is for a community debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharin	5 i			
□Yes	Other. Specify Collections	<u> </u>			
Lasik Plus	Last 4 digits of account number	All Accounts	\$4.714.95		
Nonpriority Creditor's Name			. ,		
6800 Rockside Road Unit A Independence, OH 44131	When was the debt incurred?	2019			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
□Yes	■ Other. Specify Medical				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 8

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

ne-Blakeley		Case number (if known)	
		All	
	st 4 digits of account number	Accounts	\$185.3
	nen was the debt incurred?	1.2019	
	of the date you file, the claim i	is: Check all that apply	
heck one.			
	Contingent		
	Unliquidated		
•	Disputed		
	pe of NONPRIORITY unsecured	d claim:	
or a community	Student loans		
	Obligations arising out of a sepa port as priority claims	tration agreement or divorce that you did not	
·	Debts to pension or profit-sharin	ng plans, and other similar debts	
	Other. Specify Medical		
roing IIC		All	\$404.4
rcing, LLC La	st 4 digits of account number	Accounts	\$401.4
	nen was the debt incurred?	2019	
	of the date you file, the claim i	is: Check all that apply	
heck one.			
	Contingent		
	Unliquidated		
•	Disputed		
	pe of NONPRIORITY unsecured	d claim:	
or a community	Student loans		
	Obligations arising out of a sepa port as priority claims	aration agreement or divorce that you did not	
	Debts to pension or profit-sharin	ng plans, and other similar debts	
-	Other. Specify Collections	3	
		All	
	st 4 digits of account number		\$9,176.0
Wr	nen was the debt incurred?	7.2011	
p Code As	of the date you file, the claim i	is: Check all that apply	
heck one.			
	Contingent		
	Unliquidated		
illy	Disputed		
	pe of NONPRIORITY unsecured	d claim:	
is and another			
or a community	Student loans		
or a community	Obligations arising out of a sepa	aration agreement or divorce that you did not	
or a community set? rep			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 8

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Shawnice A McCane-Blakeley		
VW Credit Inc.	Last 4 digits of account number XXXX	\$1
Nonpriority Creditor's Name 1401 Franklin Blvd. Libertyville, IL 60048	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that yereport as priority claims	ou did not
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Car lease deficiency	
VW Credit Inc.	Last 4 digits of account number XXXX	\$29
Nonpriority Creditor's Name 1401 Franklin Blvd.	When was the debt incurred? 2018	
Libertyville, IL 60048		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that yreport as priority claims 	ou did not
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Car lease deficiency	
	All	
Wood County Hospital Nonpriority Creditor's Name	Last 4 digits of account number Accounts	\$4
P.O. Box 182860 Columbus, OH 43218	When was the debt incurred? 10.2018	
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that yreport as priority claims	ou did not
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 8

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Debtor 1 Shawnice A McCane-Blakeley		Case number (if known)
AT&T U-verse P.O. Box 5014	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Carol Stream, IL 60197-5014	Last 4 digits of account number	All Accounts
Name and Address Citizens Bank 1000 Lafayette Blvd	On which entry in Part 1 or Part 2 d Line 4.3 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Bridgeport, CT 06604	Last 4 digits of account number	All Accounts
Name and Address Dominion East Ohio P.O. Box 26785 Richmond, VA 23261-6785	On which entry in Part 1 or Part 2 d Line 4.9 of (Check one): Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
		5871
Name and Address Franco M Barile 11351 Pearl Road Suite 300 Strongsville, OH 44136	On which entry in Part 1 or Part 2 d Line 4.6 of (<i>Check one</i>):	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address MetroHealth P.O. Box 931703	On which entry in Part 1 or Part 2 d Line 4.12 of (<i>Check one</i>):	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Cleveland, OH 44193-1191	Last 4 digits of account number	All Accounts
Name and Address Michelle D Heinz ESQ 11351 Pearl Road Ste 300	On which entry in Part 1 or Part 2 d Line 4.6 of (<i>Check one</i>):	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Strongsville, OH 44136	Last 4 digits of account number	5658
Name and Address Progressive Insurance P.O. Box 43258 Cleveland, OH 44143	On which entry in Part 1 or Part 2 d Line 4.5 of (Check one):	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	All Accounts
Name and Address Revenue Group 3700 Park East Dr. Suite 240	On which entry in Part 1 or Part 2 d Line 4.9 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Beachwood, OH 44122	Last 4 digits of account number	All Accounts
Name and Address Stow Municipal Court 4400 Courthouse Drive Stow, OH 44224	On which entry in Part 1 or Part 2 d Line 4.6 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Summit County Court of Common Pleas 209 S. High St.	On which entry in Part 1 or Part 2 d Line 4.6 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Akron, OH 44308	Last 4 digits of account number	5658
Part 4: Add the Amounts for Each Type of	Unsecured Claim	
		tical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
type of unsecured claim.		
6a. Domestic support obligation	ons	Total Claim 6a. \$

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 8

Debtor 1 Shawnice A McCane-Blakeley

Case number (if known)

•				•
				0.00
Total				
claims om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 9,176.00
Total claims				
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
•	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 64,765.25
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 73,941.25

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 8

Fill in this infor	mation to identify your	case:		
Debtor 1	Shawnice A McC	ane-Blakeley		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5		·			
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	Shawnice A McC				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
	lule H: Your Cod	obtore			40/45
Scried	iule II. Toul Cou	EDIOIS			12/15
fill it out, a your name	and number the entries in the e and case number (if known)	boxes on the left. Attach . Answer every question	n the Additional Page t	to this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes	S				
	hin the last 8 years, have you na, California, Idaho, Louisiana,				states and territories include
	. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt ss that apply:
3.1				☐ Schedule D, line	9
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	e
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, li	
				☐ Schedule G, line	
-	Number Street			<u> </u>	
	City	State	ZIP Code		

ŒIII	in this information to identify yo									
	, ,	ee A McCane-Blakeley								
	btor 2 buse, if filling)	,			_					
Uni	ited States Bankruptcy Court fo	r the: NORTHERN DISTRI	CT OF OHIO							
(If kr	fficial Form 106l	ncome	-			☐ Ar ☐ A 13		ent showin as of the fo	g postpetition ollowing date:	
Be a sup spo atta	as complete and accurate as plying correct information. If use. If you are separated and ch a separate sheet to this for the control of the c	possible. If two married pec you are married and not fili your spouse is not filing w rm. On the top of any addit	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with yon about	you, inclu your spo	ude infornuse. If mo	nation about ore space is	ible for your needed,
1.	Fill in your employment information.	ent	Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one jo attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Emplo	•		
	employers. Include part-time, seasonal, of	Occupation	Customer Serv							
	self-employed work. Occupation may include stud or homemaker, if it applies.	Employer's name ent Employer's address	New York Life I 200 Public Squ Cleveland, OH	are	ce					
		How long employed t	here? 6 mont	hs			_			
Esti spou	mate monthly income as of t use unless you are separated. ou or your non-filing spouse have e space, attach a separate she	he date you file this form. If			·		hat perso	n on the li	·	
2.	List monthly gross wages, deductions). If not paid month			2.	\$	3,	082.63	\$	N/A	
3.	Estimate and list monthly of	vertime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. A	dd line 2 + line 3.		4.	\$	3,08	2.63	\$	N/A	

				For	Debtor 1		otor 2 or
	Copy	y line 4 here	4.	\$	3,082.63	\$	ng spouse N/A
_				· —	0,002.00	·	1471
5.		all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	502.04	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$_	234.17	\$	N/A
	5f. 5g.	Domestic support obligations Union dues	5f.	\$_ \$	0.00	\$	N/A N/A
	5g. 5h.	Other deductions. Specify:	5g. 5h.+	· —	0.00	φ	N/A
•			_	-			
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	736.21	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,346.42	\$	N/A
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$ -	0.00	\$	N/A
	8e.	Social Security	8e.	\$_	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	N/A
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	2	2,346.42 + \$	N	I/A = \$ 2,346.42
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your of friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•	ed in <i>Sche</i>	dule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaines				if it	12. \$ 2,346.42 Combined
13.	Do y ■	ou expect an increase or decrease within the year after you file this form?	?				monthly income
		Yes. Explain: Debtor has child support order for \$305 a month	but h	as ye	t to receive an	y payme	ents.

Official Form 106I Schedule I: Your Income page 2

						•						
Fill	in this informa	tion to identify yo	our case:									
Debtor 1 Shawnice A McCane-Blakeley						Cł	Check if this is:					
							•	amended filing				
	tor 2								ving postpetition chap	pter		
(Spo	ouse, if filing)						13	expenses as or	the following date:			
Unit	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF OH	IIO		M	M / DD / YYYY				
l .	e numbe r nown)											
Of	fficial Fo	rm 106J				-						
Sc	chedule	J: Your	Exner	1999						12/15		
				If two married people	are filing together h	oth are e	nually	v responsible fo	or supplying correct			
info	ormation. If m		eded, atta	ch another sheet to th								
Par	t 1: Descr	ibe Your House	hold									
1.	Is this a join											
	■ No. Go to		in a sonar	ate household?								
	_		iii a sepai	ate nousenoid:								
	□ N		st file Offici	al Form 106J-2, <i>Expen</i> s	ses for Separate House	ehold of D	ebtor	2.				
2.	Do you have	e dependents?	□ No									
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent			_	Dependent's age	Does dependent live with you?			
	Do not state	the							□ No			
	dependents	names.			Son			4 years	Yes			
									□ No			
									☐ Yes			
									□ No			
									☐ Yes			
									□ No			
									☐ Yes			
3.	expenses of	enses include f people other t d your depende	han $_{m au}$	No Yes								
Par	t 2: Estim	ate Your Ongoi	ng Monthl	y Expenses								
exp				uptcy filing date unless y is filed. If this is a su								
•		e naid for with	non occh	novornment accietes	o if you know							
the		n assistance an		government assistance luded it on <i>Schedule I</i>				Your expe	enses			
4.		or home owners and any rent for the		ses for your residence r lot.	. Include first mortgag		\$_		550.00			
	If not includ	ed in line 4:										
	4a. Real e	estate taxes				4a.	\$		0.00			
		rty, homeowner's	s, or renter	's insurance		4b.	- : -		0.00			
	•	•		pkeep expenses		4c.	: -		20.00			
		owner's associat				4d.	\$		0.00			
5	Additional n	nortana nove	onto for vo	ur residence such as	hama aquitu laana	5	Φ –		0.00			

ation to identify your	case:					
Shawnice A McCa	ne-Blakeley					
First Name	Middle Name	Last	Name			
First Name	Middle Name	Last	Name			
cruptcy Court for the:	NORTHERN DISTRIC	CT OF OHIO				
					☐ Check if amended	
106Dec						
on About a	n Individua	al Debto	or's Sch	nedules		12/15
or property by fraud in	connection with a ba					
or agree to pay some	one who is NOT an att	orney to help	you fill out bar	nkruptcy forms?		
me of person						
of perjury, I declare true and correct.	that I have read the su	ımmary and so	hedules filed	with this declarat	ion and	
		X				
e A McCane-Blake of Debtor 1	ey		Signature of De	ebtor 2		
ne 25, 2019			Date			
	Shawnice A McCa First Name First Name cruptcy Court for the: 106Dec Dn About a ple are filing together form whenever you fil or property by fraud in U.S.C. §§ 152, 1341, 13 Below or agree to pay some or of perjury, I declare to rue and correct. nice A McCane-Blakel of Debtor 1	Tirst Name Middle Name Aruptcy Court for the: NORTHERN DISTRICE 106Dec On About an Individua ple are filing together, both are equally respectively by fraud in connection with a bar J.S.C. §§ 152, 1341, 1519, and 3571. Below or agree to pay someone who is NOT an attempt of person of perjury, I declare that I have read the surue and correct. nice A McCane-Blakeley of Debtor 1	Shawnice A McCane-Blakeley First Name Middle Name Last Tript Name Middle Name Last Acruptcy Court for the: NORTHERN DISTRICT OF OHIO 106Dec On About an Individual Debto ple are filing together, both are equally responsible for surform whenever you file bankruptcy schedules or amended for property by fraud in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571. Below Or agree to pay someone who is NOT an attorney to help to the property of perjury, I declare that I have read the summary and so the property of perjury, I declare that I have read the summary and so the person of perjury, I declare that I have read the summary and so the person of perjury of perjury, I declare that I have read the summary and so the person of perjury of perjury, I declare that I have read the summary and so the person of perjury, I declare that I have read the summary and so the person of perjury of perjury, I declare that I have read the summary and so the person of perjury of perjury, I declare that I have read the summary and so the person of perjury, I declare that I have read the summary and so the person of perjury, I declare that I have read the summary and so the person of perjury, I declare that I have read the summary and so the person of perjury of perjury of perjury.	Shawnice A McCane-Blakeley First Name Middle Name Last Name Arruptcy Court for the: NORTHERN DISTRICT OF OHIO 106Dec On About an Individual Debtor's Schaple are filling together, both are equally responsible for supplying correctors whenever you file bankruptcy schedules or amended schedules. A property by fraud in connection with a bankruptcy case can result in J.S.C. §§ 152, 1341, 1519, and 3571. Below or agree to pay someone who is NOT an attorney to help you fill out bankruptcy case to pay someone who is NOT an attorney to help you fill out bankruptcy case. To of perjury, I declare that I have read the summary and schedules filed rue and correct. The A McCane-Blakeley To Debtor 1 Signature of Debtor 1	Shawnice A McCane-Blakeley First Name Middle Name Last Name First Name Middle Name Last Name Another Schedules Independent of the: NORTHERN DISTRICT OF OHIO 106Dec On About an Individual Debtor's Schedules ple are filing together, both are equally responsible for supplying correct information. Form whenever you file bankruptcy schedules or amended schedules. Making a false star property by fraud in connection with a bankruptcy case can result in fines up to \$250,0 J.S.C. §§ 152, 1341, 1519, and 3571. Below Or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Attach Ba Declaration or of perjury, I declare that I have read the summary and schedules filed with this declaration or of perjury, I declare that I have read the summary and schedules filed with this declaration of person Signature of Debtor 2 Signature of Debtor 2	Shawnice A McCane-Blakeley First Name Middle Name Last Name First Name Middle Name Last Name Kruptcy Court for the: MORTHERN DISTRICT OF OHIO Check if amended 106Dec On About an Individual Debtor's Schedules Ple are filling together, both are equally responsible for supplying correct information. Form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonmen J.S.C. §§ 152, 1341, 1519, and 3571. Below Or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Me of perjury, I declare that I have read the summary and schedules filed with this declaration and rue and correct. Inice A McCane-Blakeley Of Debtor 1 Attach Bankruptcy Petition Preg. Declaration, and Signature (Office Name of Debtor 2) Signature of Debtor 2

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Elli in this in Com					
	nation to identify you				
Debtor 1	Shawnice A Mc	Cane-Blakeley Middle Name	Last Name		
Debtor 2	, not raine	madio Name	2001.110		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Case number					
(if known)					Check if this is an
					amended filing
Official Ea	was 407				
Official Fo		Affaina fan Indibid	duala Filima fan B		
		Affairs for Individ			4/19
		ible. If two married people a attach a separate sheet to			
	n). Answer every que			,	
Part 1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1. What is you	r current marital statu	ıs?			
_ Massisad					
☐ Married ■ Not mai					
2. During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
□ No					
Yes. Lis	st all of the places you	ived in the last 3 years. Do no	ot include where you live now	I.	
Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
	skett Road , OH 44111	From-To: 2017-2018	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
		ver live with a spouse or leg			
=					
■ No □ Yes Ma	ake sure vou fill out Sc	hedule H: Your Codebtors (Ot	fficial Form 106H)		
	ake sure you iii out ool	icadic 11. Tour Godebiors (Of	modification room.		
Part 2 Explai	in the Sources of You	r Income			
Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part	-time activities.	endar years?
□ No					
Yes. Fil	I in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,073.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Official Form 107			airs for Individuals Filing for B	ankruptcy	page 1

19-13937-aih Doc 1 FILED 06/25/19 ENTERED 06/25/19 13:46:41 Page 33 of 53

Best Case Bankruptcy

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an

paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... paid still owe

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
DBS Financial 711 Johnston St. Suite 1B Akron, OH 44306	Wages. \$595.52 in last 90 days ☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished.	2019	\$0.00
	☐ Property was attached, seized or levied.		

Official Form 107

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

☐ Yes. Fill in the details.

Describe the property you lost and Describe any insurance coverage for the loss how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Par	t 7: List Certain Payments or Transfers						
16.	6. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.			ty to anyone you			
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment		
	Borders & Gerace LLC 3401 Enterprise Parkway Suite 340 Beachwood, OH 44122 kblaw123@gmail.com	Chapter 7 Bankruptcy		6/2019	\$800.00		
17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to a promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.			ty to anyone who				
	No No						
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment		
18.	transferred in the ordinary course of your busin						
	Person Who Received Transfer Address	Description and value of property transferred		any property or received or debts change	Date transfer was made		
	Person's relationship to you						
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No	, did you transfer any property to a sel tion devices.)	lf-settled tru	st or similar device o	of which you are a		
	☐ Yes. Fill in the details.						
	Name of trust	Description and value of the proper	ty transferre	ed	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and Stora	ge Units				
20.	Within 1 year before you filed for bankruptcy, w	vere any financial accounts or instrum	ents held in	your name, or for yo	ur benefit, closed,		
	sold, moved, or transferred? Include checking, savings, money market, or or	ther financial accounts; certificates of	deposit; sh	ares in banks, credit	unions, brokerage		

houses, pension funds, cooperatives, associations, and other financial institutions.

_ ...

☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred Last balance before closing or transfer

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	o you now have, or did you have within 1 yea ash, or other valuables?	r before you filed for bankruptcy, a	ny safe deposit box or other deposito	ory for securities,
	l No			
	Yes. Fill in the details.			
-	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
2. H a	ave you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?
	_			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Part 9	Identify Property You Hold or Control for	Someone Else		
	o you hold or control any property that some or someone.	one else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust
	No Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Part 1	0: Give Details About Environmental Inform	nation		
or the	e purpose of Part 10, the following definitions	s apply:		
to	nvironmental law means any federal, state, or oxic substances, wastes, or material into the a	air, land, soil, surface water, ground	- •	
S	ite means any location, facility, or property as own, operate, or utilize it, including disposal	s defined under any environmental	aw, whether you now own, operate,	or utilize it or used
H	azardous material means anything an enviror	nmental law defines as a hazardous	waste, hazardous substance, toxic s	substance,
Report	t all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.	
24. H	as any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?
	No Yes. Fill in the details.			
_	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25. H	ave you notified any governmental unit of any	y release of hazardous material?		
	No Yes. Fill in the details.			
	lame of site	Governmental unit	Environmental law, if you	Date of notice
_	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

26.	Hav	e you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlement	s and orders.
		No Yes. Fill in the details.			
		se Title se Number	Court or agency Name Address (Number, Street, City,	Nature of the case	Status of the case
Dar	4 4 4 .	Cive Details About Your Business or	State and ZIP Code)		
		Give Details About Your Business or	•		
27.	With	hin 4 years before you filed for bankrup			ny business?
		_	in a trade, profession, or other activity,	-	
		_	pany (LLC) or limited liability partnersh	ip (LLP)	
		☐ A partner in a partnership			
		An officer, director, or managing ex	ecutive of a corporation		
		☐ An owner of at least 5% of the votir	ng or equity securities of a corporation		
		No. None of the above applies. Go to	Part 12.		
		Yes. Check all that apply above and fil	ll in the details below for each business	S.	
	Business Name Address		Describe the nature of the business	Employer Identification numb Do not include Social Securit	
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	,
	inst	itutions, creditors, or other parties. No Yes. Fill in the details below.			
		me dress mber, Street, City, State and ZIP Code)	Date Issued		
Par	t 12:	Sign Below			
are with	true a a ba J.S.C Sha	ad the answers on this <i>Statement of Fi</i> and correct. I understand that making an ankruptcy case can result in fines up to . §§ 152, 1341, 1519, and 3571. wnice A McCane-Blakeley	a false statement, concealing property, \$250,000, or imprisonment for up to 20	or obtaining money or property by	
		ice A McCane-Blakeley re of Debtor 1	Signature of Debtor 2		
Dat	е _	June 25, 2019	Date		
■ N	lo 'es	attach additional pages to <i>Your Statem</i>			107)?
N	lo	pay or agree to pay someone who is no Name of Person Attach the Bankro			

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Debtor 1 Shawnice A McCane-Blakeley

				•
Fill in this inform	ation to identify your o	ase:		
Debtor 1	Shawnice A McCa	ne-Blakeley Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF OHIO	
Case number				D Object Williams
(ii kilowii)				☐ Check if this is an amended filing
				-
Official For	m 108			
Statemen	t of Intentio	n for Indiv	iduals Filing Under Chapt	er 7
	idual filing under char claims secured by you		out this form if:	
_	d personal property a		ot expired.	
You must file this	form with the court wi er is earlier, unless the	thin 30 days after	you file your bankruptcy petition or by the date s time for cause. You must also send copies to the	
•	ople are filing together I date the form.	in a joint case, bot	h are equally responsible for supplying correct i	information. Both debtors must
	nd accurate as possibl ur name and case num		needed, attach a separate sheet to this form. Or	the top of any additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims		
For any creditor information below		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Propert	ty (Official Form 106D), fill in the
	ditor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	IAC		☐ Surrender the property.	■ No
name:			Retain the property and redeem it.Retain the property and enter into a	☐ Yes
	2010 GMC Terrain Debtor's Possession	n .	Reaffirmation Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
David Line Van		Description		
	ur Unexpired Personal I personal property lea		n Schedule G: Executory Contracts and Unexpir	red Leases (Official Form 106G), fill
in the information	below. Do not list rea	estate leases. Une	expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your un	expired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of leas Property:	sed			□ Vaa
1 7				☐ Yes
Lessor's name: Description of leas	sed			□ No
Property:				☐ Yes
Lessor's name:				□ No
Official Form 108		Statement of Int	ention for Individuals Filing Under Chapter 7	page 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Debtor 1 Shawnice A McCane-Blakeley	Case number (if known)				
Description of leased Property:	☐ Yes				
Lessor's name: Description of leased	□ No				
Property:	☐ Yes				
Lessor's name: Description of leased	□ No				
Property:	☐ Yes				
Lessor's name: Description of leased	□ No				
Property:	☐ Yes				
Lessor's name: Description of leased	□ No				
Property:	☐ Yes				
Part 3: Sign Below					
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.					
X /s/ Shawnice A McCane-Blakeley					
Shawnice A McCane-Blakeley Signature of Debtor 1	Signature of Debtor 2				
Date June 25, 2019	Date				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill i	n this information to identify your case:				directed in this form and	in Form
Deb	tor 1 Shawnice A McCane-Blakeley		122	2A-1Supp:		
Debi	tor 2		•	1. There is no pres	sumption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District	of Ohio		applies will be	to determine if a presun made under <i>Chapter 7 I</i> ficial Form 122A-2).	
Case (if kno	e number		— I I .		,	
(ii idic	,				t does not apply now be y service but it could ap	
				☐ Check if this is a	an amended filing	
Off	icial Form 122A - 1					
Ch	apter 7 Statement of Your Cu	rrent Moi	nthly Inc	ome		12/15
attach case	complete and accurate as possible. If two married people in a separate sheet to this form. Include the line number to number (if known). If you believe that you are exempted from military service, complete and file Statement of Exemple. 1: Calculate Your Current Monthly Income	which the addition om a presumption	nal information a of abuse because	pplies. On the top of a se you do not have pri	nny additional pages, writ marily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one of	only.				
	■ Not married. Fill out Column A, lines 2-11.					
	☐ Married and your spouse is filing with you. Fill o	out both Columns	A and B, lines	2-11.		
	☐ Married and your spouse is NOT filing with you	. You and your s	spouse are:			
	☐ Living in the same household and are not leg	ally separated.	Fill out both Col	umns A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evad	legally separated	d under nonban	kruptcy law that appl	ies or that you and your	
10 th	Il in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-te 6 months, add the income for all 6 months and divide the total ousses own the same rental property, put the income from that	month period would al by 6. Fill in the re	be March 1 throusult. Do not include	igh August 31. If the am le any income amount n	ount of your monthly incom	ne varied during le, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and commission	ons (before all	\$ 2,371.25	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payments from	a spouse if	\$	\$	
4.	All amounts from any source which are regularly portion of your or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	t. Include regula ld, your depende	contributions nts, parents,	\$305.66	\$	
5.	Net income from operating a business, profession	•				
			otor 1			
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00				
	Ordinary and necessary operating expenses		Copy here ->	\$ 0.00	\$	
	Net monthly income from a business, profession, or fa	rm \$	Copy nere ->	Ψ	Ψ	
ъ.	Net income from rental and other real property	Deh	otor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	·	Copy here ->	\$ 0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Best Case Bankruptcy

\$

0.00

7. Interest, dividends, and royalties

					Column A Debtor 1		Column B Debtor 2 o non-filing		
8. U	Inemploy	ment compensation			\$	0.00	\$		
		er the amount if you contend that the amount Security Act. Instead, list it here:	received was a benefi	it under					
	For you_	\$	0.0	00					
o n		spouse \$		_					
b	enefit und	r retirement income. Do not include any amer the Social Security Act.			\$	0.00	\$		
D re d	o not inclueceived as	om all other sources not listed above. Spe ude any benefits received under the Social S is a victim of a war crime, a crime against hun errorism. If necessary, list other sources on a	Security Act or payment nanity, or international	ts or	¢	0.00	¢		
	• —			_	\$	0.00	\$ \$		
		otal amounts from separate pages, if any.			φ	0.00	\$		
_		, , , ,			Ψ	0.00	Ψ		
		your total current monthly income. Add lin nn. Then add the total for Column A to the tot		\$	2,676.91	+		= \$	2,676.91
						J [Total	current monthly
Part 2	Dete	ermine Whether the Means Test Applies to	o You						
12. C	alculate y	your current monthly income for the year.	Follow these steps:						
1	2a. Copy	your total current monthly income from line 1	1		Сору	line 11 h	nere=>	\$	2,676.91
	Multip	ly by 12 (the number of months in a year)						X	12
1	2b. The re	esult is your annual income for this part of the	e form				12b	. \$	32,122.92
13. C	alculate t	the median family income that applies to y	you. Follow these step	s:					
F	ill in the st	tate in which you live.	ОН						
F	ill in the n	umber of people in your household.	2						
		nedian family income for your state and size					13.	\$	62,308.00
fo	o find a lis or this form	st of applicable median income amounts, go on. This list may also be available at the banki	online using the link sp ruptcy clerk's office.	ecified	in the separa	te instruc	tions		
14. H	low do the	e lines compare?							
1	4a. ■	Line 12b is less than or equal to line 13. Or Go to Part 3.							
1	4b. □	Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2,	The pr	esumption of	abuse is	determined b	y Form 1.	22A-2.
Part 3	Sigr	n Below							
	By sig	ning here, I declare under penalty of perjury	that the information or	this st	atement and i	n any atta	achments is tr	ue and c	orrect.
	X /s/	Shawnice A McCane-Blakeley							
		awnice A McCane-Blakeley nature of Debtor 1							
		ne 25, 2019 //DD / YYYY							
	If you	checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you	checked line 14b, fill out Form 122A-2 and fi	le it with this form.						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2018 to 05/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: New York Life

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\,\bigsim \text{90.00} \\ \text{from check dated} \,\bigsim \frac{11/30/2018}{2018} \\ \text{2.31/2018} \\ \text{12/31/2018} \\ \text{12/31/2018}

This Year:

Current Year-to-Date Income: \$14,227.50 from check dated 5/31/2019.

Income for six-month period (Current+(Ending-Starting)): \$14,227.50 .

Average Monthly Income: \$2,371.25.

Line 4 - Child support income (including foster care and disability)

Source of Income: **Child Support**Constant income of **\$305.66** per month.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Shawnice A McCane-Blakeley		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSAT	TION OF ATTOR	NEY FOR DE	CBTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce ompensation paid to me within one year before the filing of the e rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy, o	or agreed to be paid	to me, for service	
	For legal services, I have agreed to accept		\$	800.00	
	Prior to the filing of this statement I have received		\$	800.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	I have not agreed to share the above-disclosed compensation	n with any other person u	nless they are memb	pers and associate	s of my law firm.
	I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of t				ny law firm. A
6. I	n return for the above-disclosed fee, I have agreed to render le	gal service for all aspects	of the bankruptcy c	ase, including:	
b. c.	Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce	of affairs and plan which r confirmation hearing, and	may be required; I any adjourned hear	rings thereof;	
	reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on househo	needed; preparation a			
7. B	y agreement with the debtor(s), the above-disclosed fee does n Representation of the debtors in any discharg any other adversary proceeding.			es, relief from s	stay actions or
	CER	RTIFICATION			
	certify that the foregoing is a complete statement of any agree nkruptcy proceeding.	ment or arrangement for p	payment to me for re	epresentation of th	ne debtor(s) in
Ju	ne 25, 2019	/s/ Keith L. Borders	S		
Da		Keith L. Borders			
		Signature of Attorney			
		Borders & Gerace 3401 Enterprise Page 1			
		Suite 340			
		Beachwood, OH 44			
		216-766-5704 Fax			
		kblaw123@gmail.c	OIN		
		wame oj taw jirm			

United States Bankruptcy Court Northern District of Ohio

In re	Shawnice A McCane-Blakele	ey	Case No.
		Debtor(s)	Chapter 7
	VE	RIFICATION OF CREDITOR	MATRIX
Γhe abo	ove-named Debtor hereby verifi	ies that the attached list of creditors is true and	correct to the best of his/her knowledge.
Date:	June 25, 2019	/s/ Shawnice A McCane-Blake	
		Shawnice A McCane-Blakeley Signature of Debtor	•

AT&T U-verse P.O. Box 5014 Carol Stream, IL 60197-5014

Citizens Bank 1000 Lafayette Blvd Bridgeport, CT 06604

City of East Cleveland Automated Traffic Control P.O. Box 22091 Tempe, AZ 85285-2091

CNAC 12802 Hamilton Crossings Blvd. Carmel, IN 46032

Convergent Outsourcing 800 SW 39th St. Renton, WA 98057

Credit Acceptance P.O. Box 5070 Southfield, MI 48086-5070

Credit Collection Service P.O. Box 447 Norwood, MA 02062

DBS Financial 711 Johnston St. Suite 1B Akron, OH 44306

Dominion East Ohio P.O. Box 26785 Richmond, VA 23261-6785

Enhanced Recovery P.O. Box 57547 Jacksonville, FL 32241

First Federal Credit Control, Inc. 24700 Chagrin Blvd. Suite 205 Beachwood, OH 44122-5662

Franco M Barile 11351 Pearl Road Suite 300 Strongsville, OH 44136

IC System, Inc. 444 Highway 96 East P.O. Box 64437 Saint Paul, MN 55164-0437

Lasik Plus 6800 Rockside Road Unit A Independence, OH 44131

MetroHealth P.O. Box 931703 Cleveland, OH 44193-1191

Michelle D Heinz ESQ 11351 Pearl Road Ste 300 Strongsville, OH 44136

Progressive Insurance P.O. Box 43258 Cleveland, OH 44143

Receivables Outsourcing, LLC P.O. Box 62850 Baltimore, MD 21264

Revenue Group 3700 Park East Dr. Suite 240 Beachwood, OH 44122

Stow Municipal Court 4400 Courthouse Drive Stow, OH 44224 Summit County Court of Common Pleas 209 S. High St. Akron, OH 44308

US Department of Education 2401 International P.O. Box 7859 Madison, WI 53704

VW Credit Inc. 1401 Franklin Blvd. Libertyville, IL 60048

Wood County Hospital P.O. Box 182860 Columbus, OH 43218